

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		2	4/27/01
FORMALITY REVIEW	40	056	05/02/01
RESPONSE F RMALITY REVIEW	JAP	140	7-3-01

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 ÷ ..... Restricted  
 N ..... Not elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

BEST AVAILABLE COPY

Claim	Date
1	5/11/01
2	5/11/01
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If more than 150 claims or 10 actions  
staple additional sheet here

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